

Please type a plus sign (+) inside this box → ☒

PTO/SB/21 (08-00)
Approved for use through 10/31/2002 OMB 0651-0031
U.S. Patent and Trademark Office U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/021,857	
	Filing Date	12/17/2001	
	First Named Inventor	John M. Saville	
	Group Art Unit	1661	
	Examiner Name	Locker, Howard J.	
Total Number of Pages in This Submission	2	Attorney Docket Number	

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input checked="" type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Change of Correspondence Address
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	John M. Saville
Signature	<i>John M. Saville</i>
Date	4-23-03

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: 06/19/2003			
Typed or printed name	Wendy R. White	Date	6-19-2003
Signature	<i>Wendy R. White</i>		

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



PTO/SB/24 (10-01)

Approved for use through 10/31/2002 OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

EXPRESS ABANDONMENT UNDER 37 CFR 1.138

Docket Number (Optional)

RECEIVED

To:

Assistant Commissioner for Patents
Washington, DC 20231

In re Application of John M. Saville

Application Number
10/021,857Filed
12/17/2001For
Miniature Rose Plant named SAVABUSArt Unit
1661Examiner
Locker, Howard J.

JUN 25 2003

TECH CENTER 1600/2900

Please **check only one** of boxes 1-3 below:

(If no box is checked, this paper will be treated as a request for express abandonment as of the filing date of this paper.)

1. ☒ **Express Abandonment**

I request that the above-identified application be expressly abandoned as of the filing date of this paper.

2. ☐ **Express Abandonment in Favor of a Continuing Application**

I request that the above-identified application be expressly abandoned as of the filing date accorded the continuing application filed herewith.

3. ☐ **Petition for Express Abandonment to Avoid Publication under 37 CFR 1.138(c)**

I hereby petition to expressly abandon the above-identified application to avoid publication.

NOTE: The application will be published in regular course unless the petition is recognized by the Pre-Grant Publication Division in sufficient time to avoid publication (e.g., more than four (4) weeks prior to the projected publication date).

Petition Fee – must be filed with petition to avoid delays in recognizing the petition.a. ☐ The Commissioner is hereby authorized to charge the petition fee under 37 CFR 1.17(h) to Deposit Account No. _____.b. ☐ Check in the amount of \$ _____ is enclosed.c. ☐ Payment by credit card (Form PTO-2038 is enclosed).

Fax the petition directly to the Pre-Grant Publication Division at (703) 305-8568 or **Mail** the petition to the above address directed to **Box PGPub-ABD**.

NOTE: A paper requesting express abandonment of an application is not effective unless and until an appropriate USPTO official recognizes the paper. See MPEP 711.01. In addition, the paper will not stop publication of the application unless a petition under 37 CFR 1.138(c) is recognized by the Pre-Grant Publication Division in sufficient time to avoid publication.

I am the: ☒ applicant.☐ assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

☐ attorney or agent of record.☐ attorney or agent acting under 37 CFR 1.34(a) (may act only if box 2 above, stating that the application is expressly abandoned in favor of a continuing application, is checked). Attorney or agent registration number if acting under 37 CFR 1.34(a). _____

(Attorney or agent registration number)

John M. Saville
Signature

4.23.03
Date

John M. Saville

Typed or printed name

* Note: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

* ☒ Total of one forms are submitted.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.